

war ended, the 79th Congress voted to take away the benefits and recognition of Filipino World War II veterans in what was called the Rescissions Act of 1946.

The gentleman from New York (Mr. GILMAN) and I, along with 209 cosponsors of last year's Veterans Equity Act, are now asking our colleagues to correct this injustice that these veterans have endured for over 50 years.

Because the Filipino World War II veterans are in their seventies and eighties, their most urgent need is for health care. Our bill that we have introduced will provide access to VA medical facilities for these veterans, both in the United States and in the Philippines. We have designed the bill so that it will also provide greater access to VA medical facilities in the Philippines for U.S. veterans who are living abroad. In addition, the bill will also increase the service-connected disability compensation from what is called the peso rate to the full dollar amount for Filipino World War II veterans living in the United States, as called for in the President's budget.

The rationale for a lower payment simply does not exist for the veterans who are now U.S. citizens. All this can be achieved, Mr. Speaker, for \$36 million a year. This should be included in our final budget negotiations. I would urge my colleagues to support this cost-effective humanitarian measure.

Taken together, these acts are the steps we must take during this session of Congress on behalf of our brave colleagues who serve side by side with the forces from the United States. The House has passed the SSI Extension Act. Let us now join together in a bipartisan effort to restore health benefits to the Filipino World War II benefits.

Let us pass H.R. 1594, the Filipino Veterans' Benefits Improvement Act.

#### THE NUTRACEUTICAL RESEARCH AND EDUCATION ACT

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New Jersey (Mr. PALLONE) is recognized for 5 minutes.

Mr. PALLONE. Mr. Speaker, tomorrow I am introducing the Nutraceutical Research and Education Act which I am going to call the NREA. Many of my colleagues may recall the debate and vigorous campaign that led to the passage of the Dietary Supplement Health and Education Act of 1994. With the passage of that legislation 5 years ago, the use of alternative medicines, dietary supplements, functional food products, and medical foods has exploded.

Since the Dietary Supplement Health and Education Act was enacted, consumers have flocked to their health food stores and most recently to their drug stores, grocery stores and the

Internet to buy products that can keep them healthy. The food and pharmaceutical industries took notice hoping to realize the profits gained by entry into this growing market. The food industry responded by developing novel food products called functional foods. Pharmaceutical and dietary supplement companies have begun calling some of their products nutraceuticals, reflecting their claims for nutrients with targeted health and medical benefits.

Despite this impressive growth, the true health benefits of dietary supplements and functional foods have not been fully explored.

Congress must, Mr. Speaker, in my opinion, as a matter of public policy, encourage the scientific and clinical study of dietary supplements and functional foods. Towards this objective we have created the National Center for Complementary and Alternative Medicine at the NIH and the Office of Dietary Supplements. However, much still needs to be done. Many individuals and companies that would like to clinically research their products have encountered numerous barriers along the way; and the market is such that if I tested and developed a product, often a non-patentable product or difficult-to-patent product, someone else who has not invested time and money in clinical research can come in and develop an equivalent or similar product to mine.

The time has come for Congress to step forward and encourage a research-based dietary supplement and functional food industry. We must do this to protect the people by ensuring these products are safe and effective. Congress can help bring order to the marketplace with the creation of the proper incentives. The answer is a public-private partnership to get these products researched.

I propose, in introducing this bill, the Nutraceutical Research and Education Act, to reward the individuals and companies doing the clinical research on these products with an exclusive marketing claim. In doing so, we will give the term "nutraceutical" a legal definition and classification.

Under the bill, anyone who chooses to engage in clinical research of a natural product and determines that a health benefit exists and that that product is safe and effective to achieve this health benefit can apply to the FDA for a ruling that their product does what they claim. The FDA would then determine the merits of the application and decide whether the product does, in fact, offer a health benefit at a low risk. If so, the person would be rewarded for doing the hard work with an exclusive right to use the health claim they have proven for a period of 10 years.

In this way, we can redirect advertising dollars into research, encourage private enterprise and provide the pub-

lic with safe and effective, lower-cost and lower-risk nutraceutical products.

Mr. Speaker, I want to stress to my colleagues that my legislation does not supplant the Dietary Supplement Health and Education Act. That legislation was a watershed for the natural products industry. It protects access to products and permits some claims to be made. My legislation just takes us a step further down the road to encourage clinical research and the truthful dissemination of the results of that research to provide the American people access to these products.

Until there is a structure in place to investigate and develop dietary supplement and functional food products and prove their worth, the majority of health professionals will not recommend them, but patients will continue to take them. The NREA will make available a mechanism whereby these products are tested for quality and safety to give the people access to proven health remedies, to enable self-care.

Ultimately, Mr. Speaker, I believe the result will be cost effective, less sickness, more health, more productivity and a healthier population and industry.

#### HURRICANE FLOYD

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from North Carolina (Mrs. CLAYTON) is recognized for 5 minutes.

Mrs. CLAYTON. Mr. Speaker, Hurricane Floyd took lives, in fact 47 lives we know to date. It also took lifetimes of family possessions and family history. Lives cannot be recovered but, with effort, lifetimes can be restored. At least 35,000 lifetimes, family possessions and family history, must be restored.

Infrastructure, built over lifetimes, was destroyed, leaving losses that are currently reaching \$80 million and the numbers are growing.

At least 10 bridges are severely damaged and many more, some still underwater, were structurally damaged. At least 600 pipelines were damaged. Electricity costs are \$1 million and growing. In addition, some \$30 million in revenue has been lost. 1.2 million persons lost power due to the storm and close to 10,000 remain today without electricity. Drinking water and waste water treatment systems sustained untold damage. Bacteria, nitrates, and other pollutants have contaminated many wells. Many septic tanks are nonfunctional and due to high water tables will not be functional for some time. Agricultural losses, compounding previous losses from the drought and economic downturn and other natural calamities, will reach \$1 billion and that number is growing.

Small farm life is seriously threatened in North Carolina. Significant beach erosion has occurred.